510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

Trabecular Metal Acetabular Augments

Submitter Name:

Zimmer Trabecular Metal Technology, Inc. (Z-TMT)

Submitter Address:

80 Commerce Drive

Allendale, New Jersey 07401-1600

Contact Person:

Robert A Poggie

Phone Number:

(201) 818-1800 X 122

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(973) 884-6082

Date Prepared:

April 13, 2006

Device Trade Name:

Trabecular Metal Acetabular Augments

Device Common

Name:

Acetabular augmentation devices for total hip replacement

acetabular components

Classification Number: 21 CFR § 888.3358

Substantial Equivalence:

The term "substantial equivalence" as used in this 510(k) notification is limited to the definition of substantial equivalence found in the Federal Food, Drug and Cosmetic Act, as amended and as applied under 21 CFR 807, Subpart E under which a device can be marketed without premarket approval or reclassification. A determination of substantial equivalency under this notification is not intended to have any bearing whatsoever on the resolution of patent infringement suits or any other patent matters. No statements related to, or in support of substantial equivalence herein shall be construed as an admission against interest under the US Patent Laws or their application by the courts.

Device Description:

Trabecular Metal Acetabular Augments provide an alternative to structural allograft for augmenting moderate to large-sized segmental acetabular defects encountered in acetabular reconstruction. The Trabecular Metal Buttress and Column-Buttress Augments possess a truncated hemispherical geometry with integral flanges. The Shim Augments are space / void filler and bridge gaps between bone and other acetabular reconstructive hardware. These devices are available in several sizes and geometries to accommodate the wide range and location of bone deficiencies often encountered in revision acetabular surgery.

510(k) Summary (Continued)

Indications for Use:

The Trabecular Metal Acetabular Augment System is intended to provide the orthopedic surgeon with a prosthetic alternative to structural allograft in cases of segmental acetabular deficiencies.

Predicate Devices:

The predicated devices for which substantial equivalence has been documented herein are:

K042871 - Trabecular Metal Acetabular Augments (12/31/04, Zimmer TMT)

K012507 - The Trabecular Metal Technology Acetabular Augment System (8/30/01, Implex Corp.)

K001471 - The Implex Hedrocel Acetabular Augment System (8/7/00, Implex Corp.)

Conclusion:

The Trabecular Metal Acetabular Augments are substantially equivalent to the identified predicate devices.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

MAY 2 5 2006

Mr. Robert A. Poggie, Ph.D.
Director, Global Brand Management
Zimmer Trabecular Metal Technology, Inc.
80 Commerce Drive
Allendale, New Jersey 07401

Re: K061067

Trade/Device Name: Trabecular Metal Acetabular Augment System

Regulation Number: 21 CFR 888.3358

Regulation Name: Hip joint metal/polymer/metal semi-constrained porous-coated

uncemented prosthesis Regulatory Class: II Product Code: LPH Dated: April 13, 2006 Received: April 17, 2006

Dear Dr. Poggie:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21)

CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050. This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Mark N. Melkerson, M.S.

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

	STORY FREMERICAL NORMAL MORROLL NORM
510(k) Number (if known):	K061067
Device Name:	Trabecular Metal Acetabular Augments
Indications For Use:	
orthopedic surgeon	cetabular Augments are intended to provide the with a prosthetic alternative to structural allograft al acetabular deficiencies.
Prescription Use (Per 21 CFR 801 Subpart D	AND/OR Over-The- Counter Use (21 CFR 801 Subpart C) (Optional Format 09-2004)
(PLEASE DO NOT WRITE B	ELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of C	DRH; Office of Device Evaluation (ODE)

(Division Sign-Off)
Division of General, Restorative, and Neurological Devices

510(k) Number <u>K06/067</u>